POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Maile*	Jc 19	04-16-0;
O.I.P.E. CLASSIFIER		19	5/1 01
FORMALITY REVIEW	4 40	932	06 71-0)
RESPONSE FORMALITY REVIEW	CK	1109	10-11-01

INDEX OF CLAIMS

✔ .... Rejected	N	.... Non-elected
= .... Allowed	I	.... Interference
— (Through numeral)... Canceled	A	.... Appeal
÷ .... Restricted	O	.... Objected

Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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